MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

CLAIMS

CLAIM	AS FILED IND.	AS FILED DEP.	AFTER 1st AMENDMENT IND.	AFTER 1st AMENDMENT DEP.	AFTER 2nd AMENDMENT IND.	AFTER 2nd AMENDMENT DEP.
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50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

CLAIM	* IND.	* DEP.	* IND.	* DEP.	* IND.	* DEP.
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73			1			
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75				1		
76				1		
77				1		
78				1		
79				1		
80				1		
81				1		
82				1		
83				1		
84				1		
85				1		
86				1		
87				1		
88				1		
89				1		
90			1			
91				1		
92				1		
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.			2			
TOTAL DEP.			16			
TOTAL CLAIMS			20			

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS